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Substitute for Form PTO-875										10-785991		
APPLICATION AS FILED - PART I (Cotumn 1) (Cotumn 2)								SMALL ENTITY				R THAN ENTITY
POR			NUMB	ER FILED	NUME	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	SIC FEE CFR 1.16(a), (b), or	(c))	N/A			N/A		N/A		1	NA	
SE	URCH FEE CFR 1.16(k), (i), or		N/A			N/A		N/A		1	N/A	
EXAMINATION FEE (37 CFR 1.16(0), (p), or (q))			N/A			N/A		N/A			NA	
TOTAL CLAIMS (37 CFR 1.16(I))			minus 20 =		20			χ s		OR	х =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =		3			x =			x =	
FEE	FLICATION SIZE CFR 1.16(=))	sheets of is \$250 (\$ additional	paper, 0 125 for: 150 shee	n and drawings the application s small entity) for ets or fraction the (G) and 37 CF	size fee due reach nereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16()))								N/A			N/A	
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL			TOTAL	
~	APPI JUJ	, (Co	ION AS A lumn 1)	MEND	(Column 2)	(Column 3)		. SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A		-	MAINING VFTER NOMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADOI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1.16(1))	Ľ_	8	Minus	20	⁶ (O)		x •		OR	x 50	
	Independent (SJ CFR 1,16(h))		1	Minus	⁻ 3	\mathcal{O}		x =		OR	x 200 =	
ME	Application Size Fee (37 CFR 1.16(s))											
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(i))							NA		OR	N/A	
								ADD'L FEE		OR	TOTAL ADD'L FEE	
			lumn 1)		(Column 2)	(Column 3)				t	·	
N 18		REA	LAIMS MAINING FTER NOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADOI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
ME	Total (37 CFR 1.16())	•		Minus	-	•		χ =		OR	х =	
AMENDMENT	Independent (37 CFR 1,18(h))	•		Minus	\$104	2	ſ	x =		OR	χ e	
M	Application Size Fee (37 CFR 1.16(a))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16())							N/A		OR	N/A	
								TOTAL ADD'L FEE		OR	TOTAL ADO'L FEE	
	* If the entry in column 1 is less than the entry in column 2, write "O" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".											

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Tradsmark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.